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LUNACY AND MENTAL TREATMENT
ACTS

Annual Report of the
Board of Control
to the
Lord Chancellor

For the Year 1948

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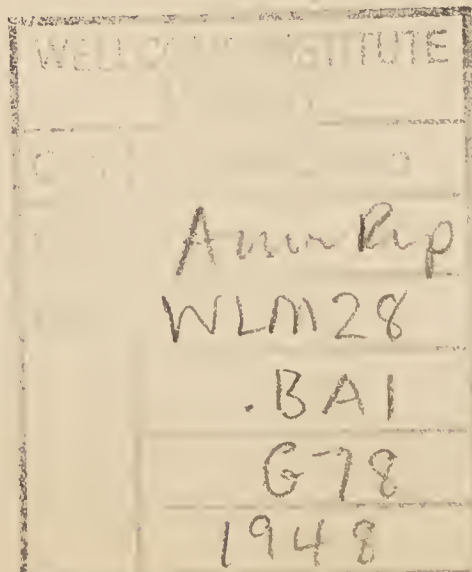
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THE THIRTY-FIFTH ANNUAL REPORT OF THE BOARD OF CONTROL FOR THE YEAR 1948

To The Right Honourable the LORD HIGH CHANCELLOR

MY LORD,

Numbers under Care

At the end of the year 1948 there were 144,725 persons under care under the Lunacy and Mental Treatment Acts. Of these 140,915 were in hospitals vested in the Minister of Health. The major problem has been, as before, shortage of accommodation and of staff. On the basis of the recognised accommodation, the overcrowding in former county and borough mental hospitals at 1st January, 1948, was 11.7 per cent. At 1st January, 1949, it was 12.2 per cent. At the end of the year the Mental Health Service was still denied the use of 3,034 beds which were originally diverted to the E.M.S. or Service Departments for purposes of war-time services and have still not yet been returned. At the same time, there were 2,689 beds not in use because of the shortage of nurses and 2,694 beds in process of reinstatement. The additions made to the accommodation by new building in the year 1948 amounted to 105 beds in mental hospitals. Early in the year the Ministry of Health had placed before the Regional Hospital Boards particulars of a number of schemes for extensions and new buildings which had been prepared by local authorities, and for which in many cases plans had been approved at the time when the hospitals were transferred to the Regional Boards. These schemes were calculated to produce 2,600 additional beds within the next two years. Relatively few of these schemes proceeded, because the shortage of labour and materials and financial consideration necessitated the postponement of many of the projected plans.

Staffing

As indicated above, a number of beds still cannot be used because of shortage of nursing staff. Shortage of domestic staff also has a repercussion on this situation. During the year, however, there has been some improvement in the position in certain areas, and some hospital authorities have gone a considerable way in solving their problem by the employment of part-time nurses; though the extent to which part-time nurses can relieve the situation is often qualified by the fact that in many instances they are only able to give service at certain times of the day or on certain days of the week.

We are glad to record that the reports of our Commissioners following their statutory visits reveal that shortages of staff and accommodation do not in general appear to have had an adverse effect on the welfare of the patients. This is of course due to the efforts of the medical and nursing staffs concerned, to whom we should like once again to pay tribute.

Health of Patients

Tuberculosis continues to occur more frequently in proportion in mental hospitals than in the general population. During the past two years much investigation by X-ray examination of the chest has been undertaken in order to discover the infection before it has given rise to gross physical

symptoms. The result has been an increase in the numbers of cases from 8.8 per thousand patients resident in 1947 to 8.9 in 1948; the death rate has, however, fallen from 5.5 to 4.7.

Diseases of the enteric group accounted for 9 deaths in an incidence of 47 cases. Gastro-intestinal infections affected less than one patient in a hundred, an incidence which is probably lower than occurs in the general population. The death rate from the disease was less than one per ten thousand patients resident.

In former county and borough mental hospitals 8,125 patients died during the year. The death rate per cent. of the average number resident was 6.26, this being 1.36 below the rate for the previous year and 1.15 below the mean percentage for the past ten years.

Social Activities

In the last Report reference was made to the concerts arranged by the Council for Music in Hospitals. The number of mental hospitals now making use of the scheme is 37, 31 of these having regular monthly concerts which are greatly appreciated by the patients. It is understood that a small sub-committee has been formed for experimental work in music therapy in mental illness.

Valuable help is being given by the Women's Voluntary Services in organising social activities in hospitals and institutions. Many hospitals have availed themselves of this help, which takes a variety of forms ranging from taking patients for walks and to shops and helping them with correspondence to assisting in the organization of whist drives, concerts, and other entertainments or occupations. We welcome this opportunity of expressing our great appreciation of the work which the Women's Voluntary Services are doing voluntarily and which not only assists the recovery of patients by bringing new interests into their lives but also helps to break down the isolation in which some mental hospitals tend to remain.

More mental hospitals are making use of the British Red Cross Picture Library Scheme. In some hospitals, art classes for patients have been established and are proving valuable.

Designation and disclaimer of Hospitals

The chief event of the year 1948 was the inception of the National Health Service, when one of the pre-occupations of the Ministry of Health was to deal with the questions of disclaimer and designation of hospitals. With regard to disclaimer, the main problem centred around the registered hospitals, and, after consultation with the Regional Hospital Boards concerned, the Minister decided to disclaim the following:—

Manchester Royal Hospital, Cheadle, Cheshire :
Barnwood House, Gloucester :
St. Andrew's Hospital, Northampton :
The Retreat, York.

Bethlem Royal Hospital joined The Maudsley in July, 1948, to form a single unit. This combined unit is designated as a teaching hospital and its medical school forms the Institute of Psychiatry which is a post-graduate institute in the British post-graduate Medical Federation of the University.

The designation of mental hospitals proceeded smoothly in spite of the complications inevitably resulting from the fact that many former public assistance institutions were continuing to accommodate mental patients, as

also were some public assistance institutions retained by local authorities but providing some accommodation for the National Health Service under the Sixth Schedule of the National Assistance Act. There is still much sorting out to be done, and the Regional Hospital Boards are working out their short-term and their long-term policy.

Criminal Justice Act

Sections 4, 24 and 26 of the Criminal Justice Act, 1948, which received Royal Assent on 30th July, 1948, are of special significance in relation to mental health. They are designed to improve the facilities available to Courts for obtaining specialist advice on the mental (or physical) condition of offenders before the method of dealing with them is determined, and to enable courts to secure appropriate treatment for offenders, either by including in a probation order, made with the offender's consent, a requirement to submit to treatment for his mental condition for a period not exceeding twelve months, or, in the case of offenders of unsound mind, by the making of a reception order which has the effect of a summary reception order made under the Lunacy Act, 1890. The Regional Hospital Boards have been advised as to these provisions and the manner in which the resources of the National Health Service should be applied.

The Act further provides, by section 62, for the vesting of Broadmoor Criminal Lunatic Asylum, which will in future be known as Broadmoor Institution, in the Minister of Health and for its management by the Board of Control.

Examination of Reception Documents

In their report of 1846 to the Lord Chancellor the Commissioners in Lunacy wrote—"The Commissioners have found it scarcely practicable in many instances to compel medical practitioners when certifying as to the insanity of private patients, to set forth, with any degree of care or correctness the facts upon which their opinions have been formed; and the exceeding inaccuracy of numerous certificates has added materially to the amount of correspondence in which the Commissioners have been engaged".

The situation is still unsatisfactory. During a period of three months in 1948 an investigation was made into the number of admission documents for temporary and certified patients which on examination were found to require amendment or had to be rejected. The documents received numbered 6,156 and of these 384 were returned for amendment on medical grounds and 1,291 for amendment for technical reasons. Ultimately 55 were rejected on medical grounds and 55 on technical grounds.

Registered Hospitals and Licensed Houses

During the year the Registered Hospitals and Licensed Houses were visited by Commissioners and were found to be generally satisfactory.

Visits were also paid to the Royal Naval Hospital, Great Yarmouth, to D. Block of the Royal Military Hospital, Netley, and to Broadmoor Criminal Lunatic Asylum. Satisfactory reports were received on all of them.

The reports following visits to single patients indicated that these were in receipt of proper care and attention.

Prosecution

One prosecution was undertaken on our Order and resulted in a conviction. The defendant, a nurse at Three Counties Mental Hospital, was on the 8th August, 1948, at the Biggleswade Magistrates' Court, found guilty of ill-treating a patient contrary to Section 322 of the Lunacy Act, 1890, and fined £2.

By Order of the Board,

(Signed) P. BARTER,

Chairman.

(Signed) H. C. BLEAKLEY,

Secretary.

32, Rutland Gate,
Knightsbridge,
London, S.W.7.

June, 1949.

APPENDIX

DISTRIBUTION OF PATIENTS

The distribution of all patients at the end of the year 1948 may be seen by reference to Tables I and II but it may be pointed out that 97 per cent. of them were resident in hospitals vested in the Minister of Health, 90 per cent. being in former county and borough mental hospitals.

Movement of Patients

Admissions, Discharges, Transfer to other Care and Deaths in 1948. Owing to the absence of detailed information of the movement of persons suffering from mental disorder in former public assistance institutions and public health general hospitals now designated as mental hospitals and in premises not vested in the Minister of Health but deemed to be mental hospitals, particulars of the persons in these hospitals are not included; and it is for this reason that the total number under care shown in Tables I and II differs from the number remaining at the end of the year as given below.

The following statement includes patients of each status (voluntary, temporary and certified):—

Resident on 1st January, 1948	...	...	...	...	...	...	134,843
Direct admissions	...	...	...	...	...	...	51,227
Indirect admissions (excluding re-gradings)	...	...	...	...	...	...	2,008
							<hr/> 188,078 <hr/>
Discharged and Departed:—							
Recovered	...	...	...	...	...	...	16,445
Relieved...	...	...	...	...	...	...	18,530
Not improved	...	...	...	...	...	...	4,884
By operation of law*	...	...	...	...	...	...	294
“Not now insane”	...	...	...	...	...	...	29
Transferred (under Order) to other care	...	...	...	...	...	...	1,620
Died	...	...	...	...	...	...	8,738
Remained at end of year	...	...	...	...	...	...	137,538
							<hr/> 188,078 <hr/>

* By reason of irregular admission documents, the lapsing of reception orders (Section 38, Lunacy Act, 1890, and Section 7, Lunacy Act, 1891) or discharge after absconding (Section 85, Lunacy Act, 1890).

TABLE I

SUMMARY OF PERSONS SUFFERING FROM MENTAL DISORDER, 1ST JANUARY, 1949

Arranged according to Class

Where maintained on 1st January, 1949	Private			Health Service			Broadmoor Patients			Total		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
In Hospitals vested in the Minister of Health:—												
(i) Designated as Mental Hospitals:—												
Former County and Borough Mental Hospitals ...	386	939	1,325	55,890	74,136	130,026	96	22	118	56,372	75,097	131,469
Former Registered Hospitals...	360	607	967	58	96	154	—	—	—	418	703	1,121
Former Public Assistance Institutions and Public Health General Hospitals ...	—	—	—	3,316	4,706	8,022	—	—	—	3,316	4,706	8,022
(ii) Teaching Hospitals ...	1	—	1	107	180	287	—	—	—	108	180	288
(iii) Other Premises ...	1	4	5	1	9	10	—	—	—	2	13	15
In Premises not vested in the Minister of Health but deemed to be Mental Hospitals ...	—	—	—	100	119	219	—	—	—	100	119	219
In Registered Hospitals ...	418	773	1,191	—	—	—	—	—	—	418	773	1,191
In Licensed Houses:—												
Metropolitan ...	223	537	760	1	3	4	—	—	—	224	540	764
Provincial ...	305	1,014	1,319	188	—	188	—	—	—	493	1,014	1,507
In Hospitals and Nursing Homes approved under the Mental Treatment Act:—												
Hospitals ...	—	—	—	—	—	—	—	—	—	—	—	—
Nursing Homes ...	4	52	56	—	—	—	—	—	—	4	52	56
In Naval and Military Hospitals ...	187	—	187	—	—	—	—	—	—	187	—	187
In Broadmoor ...	—	—	—	1	—	1	676	190	866	677	190	867
In Private Single-Care ...	13	60	73	—	—	—	—	—	—	13	60	73
Total ...	1,898	3,986	5,884	59,662	79,249	138,911	772	212	984	62,332	83,447	145,779
Increase during 1948			Total	Average Annual De-crease in the five years 1944–1948 inclusive.			Private Health Service/Rate Aided Broadmoor Patients			Total		
{ Private ...				{ Private ...			{ Private ...			{ Private ...		
{ Health Service/Rate Aided ...				{ Health Service/Rate Aided ...			{ Health Service/Rate Aided ...			{ Health Service/Rate Aided ...		
{ Broadmoor Patients ...				{ Broadmoor Patients ...			{ Broadmoor Patients ...			{ Broadmoor Patients ...		
Total ...			99*	Total			Total			Total		
			106									
			7									
			7,322*									
			1,925*									
			2,017									
			14									
			70									
			56									
			5,242									
			5,397*									
			7,259									
			1,025									
			856†									
			24†									
			2†									
			487									
			274†									
			2†									
			1,130†									
			1,512									
			356									

TABLE II

SUMMARY OF PERSONS SUFFERING FROM MENTAL DISORDER, 1ST JANUARY, 1949.
Classified according to Status.

Where maintained on 1st January, 1949.	Voluntary			Temporary			Certified			Total		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
In Hospitals vested in the Minister of Health:—												
(i) Designated as Mental Hospitals:												
Former County and Borough Mental Hospitals ...	8,481	10,513	18,994	129	317	446	47,762	64,267	112,029	56,372	75,097	131,469
Former Registered Hospitals	179	315	494	4	9	13	235	379	614	418	703	1,121
Former Public Assistance Institutions and Public Health General Hospitals ...	206	466	672	16	34	50	3,094	4,206	7,300	3,316	4,706	8,022
(ii) Teaching Hospitals ...	108	180	288	—	—	—	—	—	—	108	180	288
(iii) Other Premises ...	2	13	15	—	—	—	—	—	—	2	13	15
In premises not vested in the Minister of Health but deemed to be Mental Hospitals ...	—	—	—	—	—	—	100	119	219	100	119	219
In Registered Hospitals ...	154	327	481	1	9	10	263	437	700	418	773	1,191
In Licensed Houses:—												
Metropolitan ...	78	221	299	2	1	3	144	318	462	224	540	764
Provincial ...	106	376	482	1	3	4	386	635	1,021	493	1,014	1,507
In Hospitals and Nursing Homes approved under the Mental Treatment Act:—												
Hospitals ...	—	—	—	—	—	—	—	—	—	—	—	—
Nursing Homes ...	4	51	55	—	1	1	—	—	—	4	52	56
In Naval and Military Hospitals ...	3	—	3	—	—	—	184	—	184	187	—	187
In Broadmoor ...	—	—	—	—	—	—	677	190	867	677	190	867
In Private Single-Care ...	2	3	5	—	—	—	11	57	68	13	60	73
Total ...	9,323	12,465	21,788	153	374	527	52,856	70,608	123,464	62,332	83,447	145,779
Of Total { Private ...	623	1,528	2,151	10	26	36	1,265	2,432	3,697	1,898	3,986	5,884
{ Health Service ...	8,700	10,937	19,637	143	348	491	50,819	67,964	118,783	59,662	79,249	138,911
{ Broadmoor Patients ...	—	—	—	—	—	—	772	212	984	772	212	984

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